

annum. No young officer—or candidate—reads a Warrant with much understanding. We had not noticed a simple sentence that this Warrant did not apply to India, or considered exactly what it meant. However, we knew later. The position had been camouflaged, and we were caught in the toils of the hunter.

Sir William Macpherson's idea is beautiful and simple. The War Office is short by, I believe, some sixty officers, and not only the twenty asked for, and these sixty officers' work is thrust upon others. Surely the medical schools might well come forward and allay the discontent! I am reminded of a similar suggestion made a few years ago, when the I.M.S. were being broken on the wheel. This was that the R.A.M.C. should amalgamate with them. One can imagine the Adjutant-General, now the real chief of the Army Medical Service, smiling to himself ironically, and devising fresh forms of birdlime.

The R.A.M.C. rests upon too slender a basis at present. The corps has three pressing needs:

1. The D.G. should be upon the Army Council, where he can plainly and personally express the disabilities of his service and also set forth the needs of the army itself, in a way that no Adjutant-General is, or ever will be, capable of doing.

2. The financial contract should be regarded as inviolable, with this addendum that when a new Royal Warrant is promulgated all serving officers should have the option of transfer to the new terms if they prefer them.

3. Directors-General should be chosen from those senior and experienced officers who have borne the heat and toil of long service, whose right and claim it is to occupy the position, and who know the army from top to bottom. But possibly the War Office does not desire that the D.G. should know too much. A hard man with wide experience is a difficult nut to crack.

My experience and observation—extended now to forty-five years—is that the army has been splendidly served by my old corps, and by the medical profession, during the late war; and it is not too much to say that without the highly trained officers of the present day the British Army would fall to pieces. I will not argue this point, but those who know the multifarious duties of the Royal Army Medical Corps are well aware that it is so. And those who understand the constitution and the lines of thought in the army also know that the three points I have specially dealt with are essential in order that the corps may perform its external duties efficiently, while internally the officers of all ranks are satisfied and contented. It is not enough to flatter and make much of the corps in the strenuous days of war and to ignore obvious needs in times of peace.

I fear I cannot entirely agree with Sir Richard Luce and his committee that a high rate of pay upon joining should be offered. This makes it too easy for the subaltern to marry, and he is thus dissociated from regimental life and discipline, which is so different from that of the medical student. In my opinion the newcomer, if married, rarely becomes as efficient an officer of the army as does one who has served some six to ten years intimately appreciating the ideas current in a regiment, and incidentally learning something of his own character. Far better is it for an officer to know that his future prospects and financial position are guarded and guaranteed when eventually he takes the step against which *Punch* warned all men long ago.

I have touched upon salient points in the merest outline. All are capable of expansion in argument. But I should like to add that just as it always was, and always will be, the duty of every senior officer on the active list to uphold and support his juniors, as does every regimental colonel, so also when an officer retires he should endeavour to act upon the same principle and should press the adoption of measures that will consolidate the position of the corps. And I urge that this is also a national duty, perhaps the only one that such an officer is able to assist in.

Sir Richard Luce's committee has thus carried out loyal and valuable service in addressing the War Office. It would be interesting to see the full memorandum in print, and the reply.—I am, etc.,

Junior United Service Club,
April 20th.

T. M. CORKER,
Major-General.

MEDICAL MEMENTOES.

SIR,—With this I send you a pamphlet describing the contents of a unique cabinet of medical mementoes of five persons of supreme influence on medicine: Benjamin Rush, Edward Jenner, Joseph Lister, Louis Pasteur, Mme Marie Curie, two of them, Pasteur and Mme Curie, not being doctors.

This cabinet of memorabilia was a gift from Dr. Robert Abbe of New York to the College of Physicians of Philadelphia, which was founded in 1787, and is the oldest medical body in America. Our new building is fireproof, and our library is only excelled in America by that of the Surgeon-General of the United States Army in Washington.

Dr. Abbe appointed Dr. S. Weir Mitchell the first custodian; he passed it on to Dr. Simon Flexner of New York, he to Dr. William H. Welch of Baltimore, and he, in 1924, to myself. I have filed with the College of Physicians the name of my successor, in a sealed envelope.

The contents of the cabinet are the shoe buckles and watch of Rush; the inkstand used by Jenner, and a lock of his hair; a case of instruments used by Lister, and the test tubes of sterilized milk, now evaporated to dryness, but which, though exposed to the air, never underwent putrefaction in many years; the pasteboard model of a crystal of tartaric acid, made, labelled, and used in his lectures by Pasteur—the gift of Dr. Calmette of the Pasteur Institute; and finally, the instrument used by Professor Pierre Curie and Mme Curie, in their earliest investigations of radium, just after her discovery of radium, and presented by Mme Curie herself. This will give a good idea of the character of the contents of this unique cabinet.

There are three pre-eminent names not yet represented in this collection, and I am in diligent search of some object touched or used by them—if any such objects can be found: William Harvey in England, and Vesalius and Ambroise Paré on the Continent. If by any possibility any of your readers, British or Continental, can give me any information leading to obtaining such objects, I shall be infinitely obliged.—I am, etc.,

W. W. KEEN, M.D.,

1520, Spruce Street,
Philadelphia, April 13th.

Hon. F.R.C.S. (Eng., Edin., and Ire.)

** The well printed pamphlet forwarded by Dr. Keen with its beautiful illustrations, is in itself a medical memento of considerable interest. We wish him good fortune in his pious quest.

Obituary.

SIR ARTHUR WILLIAM MAY, K.C.B., F.R.C.S.,

Surgeon Vice-Admiral, R.N.(ret.); late Medical Director-General, Medical Department of the Navy; Honorary Physician to the King.

WE announced briefly in our last issue the death, on April 20th, of Surgeon Vice-Admiral Sir Arthur May at his Cornish home, where he had lived since retiring from the post of Medical Director-General R.N.

Arthur William May was born on June 18th, 1854; his father was the Rev. H. T. May, Fellow of New College, Oxford. From Sherborne School he went to King's College Hospital, London, and obtained the diplomas of M.R.C.S. in 1876 and L.R.C.P. in 1877. In 1914 he was elected a Fellow of the Royal College of Surgeons of England.

He entered the Royal Naval Medical Service in 1878; he served during the Egyptian war of 1882 in H.M.S. *Achilles*, receiving the medal and the Khedive's bronze star. Two years later he took part in the Suakin expedition and the Nile expedition for the relief of General Gordon at Khartoum, and was mentioned in dispatches for his attention to wounded under fire. He was promoted staff surgeon in 1890, and fleet surgeon in 1898. From 1901 to 1904 he was principal medical officer in H.M.S. *Britannia*, and from 1905 to 1909 he served as deputy director-general of the medical department of the navy. After serving as medical officer in charge of the Royal Naval Hospital, Chatham, he

was appointed in May, 1913, to succeed Sir James Porter at the Admiralty as medical director-general, with the rank of surgeon vice-admiral. Thus he was head of the Royal Naval Medical Service at the outbreak of war, and remained in charge of the department until his retirement in June, 1917. He received the C.B. in 1911 and was promoted K.C.B. in 1914.

For the following appreciation we are indebted to Sir HUMPHRY ROLLESTON, Bt., K.C.B., P.R.C.P., consulting physician to the Royal Navy:

Surgeon Vice-Admiral Sir Arthur William May, K.C.B., K.H.P., had a distinguished war service, and in 1913, after being deputy director-general of the medical department of the Admiralty, and then medical officer in charge of the Royal Naval Hospital, Chatham, he succeeded Sir James Porter as director-general, and so was responsible for the Naval Medical Service during the war until June, 1917. His term of office then came to an end, and, though not to continue his unsparing labours until the armistice must have been a disappointment, no outward sign of this was allowed to appear. His services were great, and have hardly received their due recognition, partly, no doubt, because of the relatively small personnel of the navy as compared with that of the army. The good bill of health of the navy owes much to his constant supervision; he was, of course, responsible for the very prompt and considerable expansion of the Naval Medical Service by the enrolment of temporary surgeons R.N. and the calling up of surgeons R.N.V.R., as well as for the commissioning of hospital ships and other emergency measures. A far-seeing man, he was anxious to do all he could for the good of his service by taking outside advice, and gave most loyal support to the civilian consultants. When cerebro-spinal fever broke out early in 1915 he took great trouble in formulating measures to obviate its spread, and continued to supervise the Admiralty orders, and, as new knowledge was obtained, modified them accordingly. Most conscientious, hard-working, and rather highly strung, he suffered in health from inability to save himself labour by delegating work and in other legitimate ways. With such a high standard he naturally expected much from his subordinates, and thus had the reputation of being rather a stern master. When I was his subordinate he was always most considerate and kind. After his retirement he lived at Tremeer, St. Tudy, Cornwall, and was extremely energetic in organizing Red Cross and other activities, as well as being deputy lieutenant and justice of the peace for the county. An athlete in his younger days, and always a keen sportsman, it must have been a sad trial to be laid aside by a hemiplegic attack a year ago.

Sir JAMES PORTER, K.C.B., K.C.M.G., Sir Arthur May's predecessor in the office of Medical Director-General R.N., sends us the following tribute:

I have been asked to write a brief personal appreciation of Sir Arthur May. I knew him well. In our days of active service our personal experiences of each other were wellnigh unique. When I was M.D.G. he served under me as D.M.D.G. When the great war came and I was recalled to service I served for over three years under him. Although in many ways we were men with a different outlook on life, yet we were always at one when vital service interests were at stake, in spite of the possible points of contact being numerous and not infrequently cropping up. During these long years of intimate official relations no angry word ever passed between us. I endorse all that Sir Humphry Rolleston has so well expressed. Sir Arthur outworked his strength, and so eventually by his own act and deed he compassed his end. His ardent nature and deep sense of duty led him to follow too far the specious maxim, "If you want a thing well done you should do it yourself, you should not leave it to others." Devoted to his profession, his knowledge of it was profound, extensive, and always kept abreast of the times. On entry to the Navy he obtained first place in his batch, and from that moment he never looked back. As M.D.G. his delight was to enter and encourage young surgeons of the best stamp, only the best being good enough for our invaluable seamen. For the "dry rot"

which has so disastrously attacked the medical service since May left in 1917 he can be held in no way responsible. Never a seeker of popularity, it is true he did not "suffer fools gladly." Towards the end of his active service, ill health increased the difficulties of a position which, if properly maintained, cannot be free from troubles. Sir Arthur May was an upright man, straight in all his dealings. His King and country never had a more faithful or devoted servant. Official honours are notoriously not exactly showered upon naval medical officers. Hence, presumably, it happened that neither May's gallant conduct in the *Sofa* before Khartoum in January, 1885, nor his hard administrative labours during the first three years of the great war received any recognition. No matter—"The prize he sought and won was the crown for duty done."

ROBERT J. M. BUCHANAN, M.D., F.R.C.P.,

Consulting Physician, Royal Infirmary, Liverpool; late Professor of Forensic Medicine, University of Liverpool.

THE death of Dr. R. J. M. Buchanan, which we announced in our last issue, came as a great shock to his numerous friends and patients in the city of Liverpool, and regret was universally felt at the sad loss the profession has sustained. He was taken suddenly ill with pneumonia, and passed away, within a week, on April 19th.

Dr. Buchanan's life is a striking example of consistent diligence and perseverance in surmounting difficulties and finally attaining an honoured position in his profession. As a medical student he had a distinguished record. He obtained the M.R.C.S., L.R.C.P. diplomas, and the M.B., Ch.B. degrees in 1888 with honours in systematic and clinical medicine at the Victoria University of Manchester, to which the University College of Liverpool at that time was affiliated. The following year he became M.D. and received the gold medal for his thesis. In 1897 he became M.R.C.P.Lond., and in 1908 was elected a Fellow. A strenuous worker and painstaking clinician, Dr. Buchanan, early in his career, was appointed physician to the Stanley Hospital. He also held the post of honorary physician to the Hospital for Consumption and Diseases of the Chest. Pathology was a great source of inspiration in his clinical work, and he held the post of assistant pathologist in the University, where his demonstrations were much sought after by the students, who appreciated the untiring efforts of their teacher. It was a natural consequence that Dr. Buchanan should pass on to the staff of the Royal Infirmary, where he became first assistant physician and then full physician. His retirement only last December was due to the age limit, and he was elected as honorary consulting physician.

Dr. Buchanan was an able and methodic teacher; many medical students now practitioners will call to mind affectionate memories of the man and his manner. In the University he occupied the chair of forensic medicine, which he only recently relinquished. His lectures were lucid and practical, and these were made interesting, and even entertaining, by his innate ability in word-painting. His textbook of forensic medicine and toxicology was essentially practical, and furnished without over-elaboration the information in medico-legal subjects the general practitioner should possess. As a member of the Liverpool Medical Institution he held various offices, and was a vice-president in 1914. As a speaker he was brief and to the point, and in discussions he was wont to emphasize some view that might not have occurred to others. His papers on rabies and hydrophobia, on blood in health and disease, revealed much careful research, and set forth his views in no uncertain language. He was ever ready to avail himself of the most recent advances in pathology, and especially its bearing on therapeutics. Toxaemic conditions loomed largely in his outlook on disease, and he may at times have been induced to lay too much stress on these in the application of therapeutic measures.

In the great war Dr. Buchanan served as captain, R.A.M.C., and was on the staff of the 1st General Western Hospital at Fazakerley. He took great interest in the production of gas in chemical warfare and was in